



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



CONFIRMATION NO. 9471

Bib Data Sheet

| | | | | |
|-----------------------------|------------------------------------------------|--------------|------------------------|------------------------|
| SERIAL NUMBER 10/595,943 | FILING OR 371(c) DATE 05/22/2006 RULE | CLASS 544 | GROUP ART UNIT 1624 | ATTORNEY DOCKET NO. |
|-----------------------------|------------------------------------------------|--------------|------------------------|------------------------|

APPLICANTS

Claudio Cerqueira Lopes, Del Castilho, BRAZIL;
 Rosangela Sabattini Capella Lopes, Rio de Janeiro, BRAZIL;
 Jari Nobrega Cardoso, Rio de Janeiro, BRAZIL;
 Jacqueline Alves da Silva, Rio de Janeiro, BRAZIL;
 Leticia Gomes Ferreira, Rio de Janeiro, BRAZIL;

** CONTINUING DATA *****

This application is a 371 of PCT/BR04/00236 11/25/2004

** FOREIGN APPLICATIONS *****

BRAZIL PI0307864-7 11/25/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 02/26/2007

| | | | | | |
|---------------------------------|-------------------------------------------------------------------------------------------------------|------------------|----------------|--------------|--------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | BRAZIL | 0 | 18 | 2 |
| Verified and Acknowledged | Examiner's Signature _____ Initials _____ | | | | |

ADDRESS

AIR MAIL

Claudio Cerqueira Lopes
 Don Helder Camara, 3119-casa 19/apt. 201
 21050-454 Del Castilho
 Rio de Janeiro,
 BRAZIL

TITLE

Hydrazines and derivatives production process from hydrazines and dicarboxylic acid

| | | |
|----------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE RECEIVED 450 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|----------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|